OFFICE OF REVENUE COMMISSION

P.O. Box 123, Kykotsmovi, AZ 86039,

(928) 734-3171

FAX (928) 734-3179

TOUR LICENSE APPLICATION

(Must be 18 years old to apply for a Tour License)

Name of Owner:	FAX #: _	StateZip Code:
☐ New Applicant	☐ License Renewal	☐ Sole Proprietor
☐ Partnership	☐ Corporation	☐ Step-On
Hopi Enrollment Number:	opi Enrollment Number: Federal Tax ID Number:	
Transportation: ☐ Bus ☐ `	Van ☐ Rented Vehicle	☐ Other
Provide information for all vehicles conducting Tours ☐ Copy of Insurance Policy (ies) ☐ License Numbers & Description of Insured Vehicles ☐ Copy of Bond ☐ Other information Requested ☐ Other Tour Licenses ☐ Tour Business Brochure ☐ List Driver (s)		
I hereby certify that the above information is true and correct, and that any false information provided will revoke my license.		
APPLICANTS SIGNATUL	RE	ll other rules and regulations of each Hopi Village. DATE
OFFICE USE ONLY		
Date: Amount Paid:	Receipt #: HCPO No	otification:
Comments:		
Tour License No.: Date of Issue: Occupation Code: Date: Approved Disapproved		